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412-741-9292

T-013 P002/004 F-280

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Stanley D. Ference III	(Depositor's name)
<i>Stanley D. Ference III</i>	(Signature)
10/18/2005	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/670,250	09/26/2000	Mitchell S. Cohen	YOR920000440US1 (590,024)	5891

TITLE OF INVENTION: OPTICAL FIBER SPACE TRANSFORMATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	11/09/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
ROJAS, OMAR R	2874	385-088000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

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International Business Machines Corporation Armonk, New York

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

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 A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0510 (enclose an extra copy of this form).

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 a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Stanley D. Ference IIIDate 10/18/2005Typed or printed name Stanley D. Ference IIIRegistration No. 33,879

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USPTO FACSIMILE COVER SHEET

To: Commissioner for Patents
Fax Number: (5713) 273-2885
Date: October 18, 2005
Pages: 4 pages (including this cover sheet)

MESSAGE:

Application No. 09/670,250
Examiner Omas Rojas
Art Unit 2874

Issue Fee Transmittal (in duplicate)
Fee Address Indication

YOR92000440US1
(590.024)

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